



## CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

March 20, 2009

### **H.R. 577** **Vision Care for Kids Act of 2009**

*As ordered reported by the House Committee on Energy and Commerce  
on March 4, 2009*

#### **SUMMARY**

H.R. 577 would amend the Public Health Service Act to authorize the Director of the Centers for Disease Control and Prevention (CDC) to administer grants to states to increase examinations of children for vision problems, provide treatment of any problems detected, and develop and disseminate educational materials to promote the detection of vision disorders in children. The bill would authorize the appropriation of \$65 million for those purposes over the 2010-2014 period. CBO estimates that implementing H.R. 577 would cost \$4 million in 2010 and \$54 million over the 2010-2014 period, assuming appropriation of the specified amounts. Enacting H.R. 577 would not affect direct spending or revenues.

H.R. 577 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act (UMRA) and would impose no costs on state, local, or tribal governments.

#### **ESTIMATED COST TO THE FEDERAL GOVERNMENT**

The estimated budgetary impact of H.R. 577 is shown in the following table. The costs of this legislation fall within budget function 550 (health).

	By Fiscal Year, in Millions of Dollars					2010-2014
	2010	2011	2012	2013	2014	
<b>CHANGES IN SPENDING SUBJECT TO APPROPRIATION</b>						
Authorization Level	10	13	14	14	14	65
Estimated Outlays	4	10	12	14	14	54

## **BASIS OF ESTIMATE**

H.R. 577 would authorize the appropriation of \$10 million in 2010 and a total of \$65 million over the 2010-2014 period for the purposes of detecting and treating vision disorders in low-income children. In particular, H.R. 577 would authorize the Director of the CDC to administer grants to states for three purposes: (1) providing comprehensive eye examinations to children with potential eye disorders, as identified by screenings; (2) funding treatment of disorders identified through the comprehensive eye exam; and (3) developing and disseminating educational materials on symptoms of eye disorders to parents, teachers, and health care practitioners.

Children eligible for Medicaid would not be eligible for vision care services provided through CDC grants. Other low-income children with health insurance, including those enrolled in the Children's Health Insurance Program (CHIP), could be eligible for vision care services provided through CDC grants if the coverage of such examination, treatment, or services is not provided through their health insurance. Provision of those vision care services to children enrolled in CHIP would not affect direct spending because this bill would not change eligibility or benefits provided under CHIP.

Based on historical spending patterns for similar programs at CDC, and assuming appropriation of the authorized amounts, CBO estimates that implementing H.R. 577 would cost \$54 million over the 2010-2014 period.

## **INTERGOVERNMENTAL AND PRIVATE-SECTOR IMPACT**

H.R. 577 contains no intergovernmental or private-sector mandates as defined in UMRA. Public institutions of higher education that provide education and training for health professionals in pain care would benefit from grant funds authorized in the bill.

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